# COUNTY OF MOORE NORTH CAROLINA

# REQUEST FOR PROPOSALS

RFP 2016-10

ISSUE DATE: April 29, 2016

TITLE: Uniform Services	
ISSUING DEPARTMENT:	County of Moore Financial Services 206 S. Ray Street PO Box 905 Carthage, NC 28327
<b>Sealed Proposals</b> will be received until 4:00 PM W Uniform Services for several County of Moore Dep	<b>Yednesday May 11, 2016</b> from qualified vendors for artments.
All inquiries for information concerning Instructions Procurement Procedures shall be directed to (in wri	<u>.                                      </u>
(910) 947-7 (910) 94 tvuncannon@ Sealed Proposals shall be mailed and/or hand del	rige, NC 28327 7118 (Telephone) 47-6311 (Fax) 2 moorecountync.gov  livered to the Issuing Department shown above, and this Request for Proposal. It is the sole responsibility of ing Department by the designated date and hour
• • •	d to all the terms and conditions imposed herein, the rices described in accordance with the attached signed
Firm Name:	Date:
Address:	Phone:
	By:

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#### INSTRUCTIONS FOR PROPOSALS

- 1. Sealed Proposals shall be submitted to the Issuing Department on the enclosed Proposal Form. In order for a proposal to be considered, it shall be based on the terms, conditions and specifications contained herein and shall be a complete response to this RFP. The County reserves the right to make an award in whole, or in part, and to reject and all proposals, and to waive any informality in proposals unless otherwise specified by the Bidder. The Bidder shall sign the bid correctly and bids may be rejected if they show omissions, alterations of form, additions not called for, conditional bids or any irregularities of any kind.
- 2. All labor costs, direct and indirect, shall have been determined and included in the proposal. The cost and availability of all equipment, materials, and supplies associated with performing the services described herein shall have been determined and included in the proposal. Do not include sales tax in bid figures. The County pays sales tax and will add this to your bid figures separately when invoices are paid. All price quotes shall include delivery to the delivery point, installation and set-up charges, as necessary. Goods shall be set in place ready for owner's use. All goods shall be new and of average quality. No remanufactured, refurbished or used goods will be accepted. Appropriate product information (e.g. brochures, catalog cuts, etc.) shall be included with the proposal.
- 3. After the RFP issue date, all communications between the Issuing Department and prospective Bidders shall be in writing. No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to Terra Vuncannon at the address listed on page one if this solicitation. All questions concerning this RFP shall reference the RFP number, section and page number. Questions and responses affecting the scope of the goods will be provided to all prospective Bidders by issuance of an Addendum. All written questions shall be received by the Issuing Department no later than 10:00 am Thursday May 5, 2016. NO EXCEPTIONS.
- 4. The County will not be responsible for any oral instructions. Should a Bidder find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, s/he should at once notify the Issuing Department, and a written addendum shall be issued. Acknowledgement of any Addendum received during the time of the bidding shall be noted on the Bid Form in the spaces provided. In closing of a contract, any Addendum issued shall become a part thereof.
- 5. Proposals will be examined promptly after opening and award will be made at the earliest possible date. The prices quoted must be held firm, and no bids may be withdrawn until **90 days** after bid opening date. The County reserves the right to conduct any test/inspection it may deem advisable to ensure services/materials/supplies/equipment, as appropriate, conform to specifications.
- 6. Pursuant to North Carolina General Statutes Section 143-129, "award shall be made to the lowest responsible Bidder or Bidders, taking into consideration quality, performance and the time specified in the proposals for the performance of the contract."
- 7. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each Bidder shall plainly set forth the warranty for the goods in the bid. Operations and maintenance manuals for equipment shall also be provided, as appropriate.

- 8. The County of Moore has waived the Bid Deposit.
- 9. All purchases for goods or services are subject to the availability of funds for this purpose.
- 10. The General Statures of the State of North Carolina, insofar as they apply to purchasing and competitive bidding, are made a part hereof.
- 11. The County of Moore is committed to creating and maintaining and environment free from harassment and other forms of misconduct that fundamentally compromise the working environment of the County. All contractors performing work/services at a County facility shall take all necessary steps to assure that none of its employees engage in harassment or intimidation relating to personal beliefs or characteristics of anyone on the County's premises, including but not limited to, race, religion, age, color, sex, national origin or disability. Such harassment is unacceptable and will not be condoned in any form at the County of Moore. If such conduct occurs, the contractor will take all necessary steps to stop it and prevent its future occurrence. This policy shall be strictly enforced.
- 12. For all the work being performed under this Contract, the County of Moore has the right to inspect, examine, and make copies of any and all books, accounts, records and other writing relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the vendor/contractor must make the materials to be audited available within one (1) week of the request for them.
- 13. The Bidder agrees that it will not identify the County of Moore as a client in any other proposal, resume, or informational brochure without first requesting and obtaining, in writing, the permission of the County of Moore Board of Commissioners.
- 14. All Bidders must complete and submit the Vendor Application Form with their bid package. This information will be used to create or update the County's bidder/vendor file.
- 15. The County of Moore reserves the right to reject any and all proposals. It further reserves the right to waive informalities insofar as it is authorized so to do where it deems it advisable in protection of the best interests of the County.
- 16. Proposals will be tabulated, reviewed and a recommendation presented to the County of Moore Board of Commissioners for their approval.
- 17. Any and all exceptions to the Specifications must be stated in writing, giving complete details of what is to be furnished in lieu of requested Specifications.
- 18. The County of Moore reserves the right to cancel and terminate any resulting contract, in whole or in part, without penalty, upon forty-five (45) days notices to the Vendor(s). Any contract cancellation shall not relieve the Vendor(s) of the obligation to deliver any outstanding services issued prior to the effective date of the cancellation.

### PROPOSAL REQUIREMENTS AND SCOPE OF WORK

### **Specifications:**

It is the intent to lease, rent and/or purchase working uniforms for multiple County of Moore department employees.

Proposed departments and their respective number of employees are:

Property Management: 30 employees (currently lease w/vendor clean and rental w/ employee clean)

Public Utilities: 35 employees (currently lease w/vendor clean)

Water Pollution Control Plant: 18 employees (currently lease w/vendor clean)

Solid Waste: 38 employees (currently lease w/vendor clean)

Transportation: 25 employees (currently rental w/employee clean and lease w/vendor clean)

Planning: 5 employees (currently rental w/employee clean and lease w/vendor clean)

#### **General Requirements:**

- 1. Upon contract execution vendor will fit all employees for new-unworn uniforms.
- 2. New hires will be fitted and issued new-unworn uniforms within two weeks of hire.
- 3. For leased garments vendor must provide 11 sets per full time employee and 5 sets for part time employees.
- 4. Vendor will provide lockers or racks at no charge.
- 5. Vendor will bill by department weekly. (Solid Waste has multiple locations but needs one bill for the department not location on a weekly basis.
- 6. Vendor will service weekly, either Tuesday or Wednesday 7:00 am 1:00 pm.
- 7. County may request presentation of product prior to award, including sample of all requested patches/embroiders.
- 8. Vendor must be able to include patches or embroidery to shirts. Sample patch (not exact measurements) is included as Attachment A.
- 9. Department may vary in patch/embroidery requirements. Ex. May require County Seal and name patch on garment.
- 10. Quotes should be given for three options: purchase of product, lease and cleaning service of product, rental of product with employee responsible for cleaning.
- 11. Any additional cost, including protection, replacement, size upcharge etc. must be listed on bid form.
- 12. Departments may vary in product requirements.
- 13. Employees per department are subject to change at any point in time.
- 14. All selections must be available for sizes XS thru 5XL, including Tall sizes also.
- 15. Current catalog must be submitted with bid response.

# **BID FORM**

Please give a garment description of each product. Additional lines are provided if needed.

ITEM	MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
MEN'S S/S POLO w/ pocket: Poly-Cotton Blend					
MEN'S S/S POLO no pocket: Poly-Cotton Blend					
MEN'S L/S POLO w/pocket Poly-Cotton Blend					
MEN'S L/S POLO no pocket Poly-Cotton Blend					
MEN'S S/S WICKING POLO w/pocket					
MEN'S S/S WICKING POLO no pocket					
MEN'S L/S WRINKLE FREE LOOK WORK SHIRT w/pockets					

ITEM	MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
MEN'S S/S WRINKLE FREE LOOK WORK SHIRT w/pockets					
MEN'S S/S RELAXED/COMFORT FIT WORK SHIRT w/pockets					
MEN'S L/S RELAXED/COMFORT FIT WORK SHIRT w/pockets					
MEN'S S/S OXFORD w/pockets: Description:					
MEN'S L/S OXFORD w/pockets: Description:					
MEN'S S/S 100% COTTON WORK SHORT					
MEN'S L/S 100% COTTON WORK SHIRT					
MEN'S PANT – FLAT FRONT: Description:					

ITEM	MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
MEN'S PANT – PLEATED FRONT: Description:					
MEN'S PANT - CARGO: Description:					
MEN'S PANT – FLAT FRONT with SIDE ELASTIC Description:					
MEN'S PANT – PLEATED FRONT with SIDE ELASTIC: Description					
MEN'S PANT – CARGO with SIDE ELASTIC Description:					
MEN'S CARHARTT DUNGAREE (or equal) WORK PANT:					
MEN'S FLAT FRONT WORK SHORTS					
MEN'S CARGO TYPE WORK SHORTS					

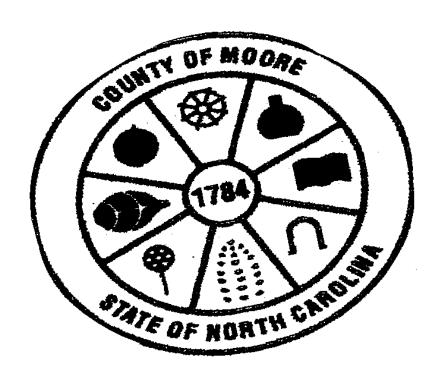
ITEM	MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
WOMEN'S SLIM FIT FLAT FRONT PANT:					
FLAT FRONT PAINT.					
WOMEN'S SLIM FIT CARGO PANT:					
CARGO FANT.					
WOMEN'S CURVY FIT FLAT FRONT					
PANT:					
WOMENT'S CURVY FIT CARGO PANT:					
TH CARGOT AINT.					
WOMEN'S L/S WORK SHIRT WRINKLE					
FREE LOOK w/pocket  – Cotton Poly Blend					
WOMEN'S S/S SMOCK with					
POCKETS, SHAPED HEMLINE					
WOMEN'S S/S POLO SHAPED FIT, V-					
NECKLINE					
MEN'S S/S RELAXED/COMORT					
FIT WORK SHIRT WITH REFLECTIVE					
STRIPES w/pockets					

ITEM	MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
MEN'S L/S RELAXED/COMORT FIT WORK SHIRT WITH REFLECTIVE STRIPES w/pockets					
UNISEX ALL SEASONAL JACKET, ELASTIC WAIST, WATER RESISTANT FINISH, FULL FRONTAL ZIP					
UNISEX LINED JACKET WITH KNIT COLLAR, CUFF AND WAISTBAND					
UNISEX HIP LENGTH JACKET WITH COLLAR, FULL FRONTAL ZIP					
WOMEN'S LAB COAT					
MEN'S LAB COAT					
COVERALLS L/S FRONT ZIP					

MATERIAL CONTENT	VENDOR ITEM NUMBER	PURCHASE COST	LEASE/WEEKLY LAUNDRY COST	RENT/NO LAUNDRY COST
		CONTENT ITEM	CONTENT ITEM COST	CONTENT ITEM COST LAUNDRY

Additional Charges:		
Replacement:	\$	per garment
• Protection:	\$	per garment
List Others:		
	<b></b> \$	per garment
	\$	per garment

# ATTACHMENT A



#### **PROPOSAL FORM**

The County of Moore requests your proposal for Uniform Services.

Proposals will be received until 4:00 pm Wednesday May 11, 2016 at Financial Services, 206 S. Ray Street, Carthage, NC 28327. Opening will not be public.

Use this form for submitting proposals. In submitting your proposal, keep in mind that any alterations, changes in proposal format, etc. will make it difficult to evaluate proposals. All items should be in the units, quantities, units of measurements, etc. specified. Do not submit alternates unless requested. The County of Moore shall reserve the right to reject any and/or all proposals.

On bahalf of	(Proposer) I am submitting a proposel for
Uniform Service for County of Moore. I ag	(Proposer), I am submitting a proposal for ee to all General Requirements of this bid.
I certify that the contents of this proposal as knowledge all requirements have been comp	e known to no one outside the undersigned, and to the best of m lied with.
Date Authorized Signature _	
Receipt of the following addendum is acknown	wledged:
Addendum No.	Date:
Addendum No.	Date:
Addendum No.	Date:

# COUNTY OF MOORE NON-COLLUSION AFFIDAVIT

State of North Carolina County of Moore

I	, being first du	uly sworn, deposes and says that:	
He/She is the	of	, the	
Bidder that has submitted the attach	ned bid;	<del></del>	
He/She is fully informed respecting of all pertinent circumstances respec		s of the attached bid and	
agreed, directly or indirectly, with a connection with the contract for which connection with such contract, or has or communication or conference with	cluding this affiant, has in any any other Bidder, firm or pers ich the attached bid has been as in any manner, directly or i ith any other Bidder or to fix or re through collusion, conspira	y way colluded, conspired, connived or son to submit a collusive or sham bid in a submitted or to refrain from bidding in indirectly, sought by agreement or collusic overhead, profit or cost element of the bid racy, connivance or unlawful agreement an	
	agreement on the part of the	r and are not tainted by any collusion, e Bidder or any of its agents, representative	ès,
		Title	
State of North Carolina County of			
Subscribed and sworn before me, This day of, 20	016		
, 20			
Notary Public			
My commission expires:			

## Moore County E-Verify Affidavit

STATE OF NORTH CAROLINA AFFIDAVIT
COUNTY OF MOORE
I, (the individual attesting below), being duly authorized by and on behalf of
(the entity bidding on project hereinafter "Employer") after first being duly
sworn hereby swears or affirms as follows:
1. Employer understands that <u>E-Verify</u> is the federal E-Verify program operated by the United States Department
of Homeland Security and other federal agencies, or any successor or equivalent program used to verify the work
authorization of newly hired employees pursuant to federal law in accordance with NCGS §64-25(5).
2. Employer understands that Employers Must Use E-Verify. Each employer, after hiring an employee to work
in the United States, shall verify the work authorization of the employee through E-Verify in accordance with
NCGS§64-26(a).
3. <u>Employer</u> is a person, business entity, or other organization that transacts business in this State and that
employs 25 or more employees in this State. (mark Yes or No)
a. YES, or
b. NO
4. Employer's subcontractors comply with E-Verify, and if Employer is the winning bidder on this project
Employer will ensure compliance with E-Verify by any subcontractors subsequently hired by Employer.
Executed, this day of, 2016.
Signature of Affiant
Print or Type Name:
State of North Carolina
County of
Signed and sworn to (or affirmed) before me, this the
County of  Signed and sworn to (or affirmed) before me, this the  day of, 2016.  My Commission Expires:
My Commission Expires:

Notary Public

KFF Number (ii applicable).	
Name of Vendor or Bidder:	
IRAN DIVESTMENT ACT ( REQUIRED BY N.C.G.S. 1	
As of the date listed below, the created by the State Treasurer p	vendor or bidder listed above is not listed on the Final Divestment List ursuant to N.C.G.S. 143-6A-4.
The undersigned hereby certifie make the foregoing statement.	s that he or she is authorized by the vendor or bidder listed above to
Signature	Date
Printed Name	Title

Notes to persons signing this form:

N.C.G.S. 143C-6A-5(a) requires this certification for bids or contracts with the State of North Carolina, a North Carolina local government, or any other political subdivision of the State of North Carolina. The certification is required at the following times:

- · When a bid is submitted
- When a contract is entered into (if the certification was not already made when the vendor made its bid)
- · When a contract is renewed or assigned

N.C.G.S. 143C-6A-5(b) requires that contractors with the State, a North Carolina local government, or any other political subdivision of the State of North Carolina must <u>not</u> utilize any subcontractor found on the State Treasurer's Final Divestment List.

The State Treasurer's Final Divestment List can be found on the State Treasurer's website at the address <a href="www.nctreasurer.com/lran">www.nctreasurer.com/lran</a> and will be updated every 180 days.



# **County of Moore**

Financial Services – Purchasing Division PO Box 905

Carthage, NC 28327

Phone: (910) 947 - 6310 Fax: (910) 947 - 6311

Please Type or Print Legibly Federal ID #		SS #		Vendor #			
Vendor Name			Date				
ORDER ADDRE	ESS		PAY ADDRESS				
Street		Street					
Street		Post Office Bo	ЭX				
City		City					
State Zip C	ode	State	Zip	Code			
CONTACT PERSON	TELEPHONE I	NUMBER	FAX NUMBE	R			
YEAR ESTABLISHED	TERMS		DISCOUNT				
CONTRACTOR'S LICENSE # (if applicable)		SIGNATURE					
This firm certifies that it is a: ( Disabled  To qualify for MWBE status, 51% of the minority group members are Black Ameri 51% of the company must be owned and on the product of the company must be product of the company must be owned and on the company must be only must be onl	Minority Busine  company must be owned a cans, Hispanic Americans controlled by disabled per  Product(s)	and controlled by minors, American Indians and sons.  and/or Service	Women I  ity groups or women. For /or American Women. To  e(s)				
	References	S					

Form W-9
(Rev. December 2014)
Department of the Treasury

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Departr	nent of the Treasury Revenue Service	racitalisation (tallis	or and octain	oution		send to	the II	15.
		on your income tax return). Name is required on this line; do	o not leave this line blank.					
oi	2 Business name/d	Isregarded entity name, if different from above						
8								
	3 Check appropriat	le box for federal tax classification; check only one of the fo	ollowing seven boxes:		4 Exempt	tions (codes	apply or	ily to
0	Individual/sole	proprietor or Corporation SCorporati	on Partnership	Trust/estate	certain entities, not individuals; see Instructions on page 3):			
ğ. 5	single-member	LLC company. Enter the tax classification (C=C corporation, S=	S.comoration P-partners	third.	Exempt payee code (if any)			
1 1	_ ,	gle-member LLC that is disregarded, do not check LLC; ch			Exemption from FATCA reporting			
Print or type Instruction	the tax classific	cation of the single-member owner.	and appropriate contact		code (if any)			
Print or type Specific Instructions on	Other (see Inst				(Applies to accounts maintained outside the U.S.)			
2	5 Address (humber	Requester's name a	and address (optional)					
g.	6 City, state, and Z	ID ands						
8	6 City, state, and 2	IP 0000						
٠,	7 List account num	ber(s) here (optional)						
	/ Lat account num	Designation (chroman)						
Par	Tayna	ver Identification Number (TIN)						
		propriate box. The TIN provided must match the nan	ne given on line 1 to av	nid Social sec	curtty numb	ber		
backu	p withholding. For	individuals, this is generally your social security nun	nber (SSN). However, f	ora II	7	ПΓ	Т	Т
		rietor, or disregarded entity, see the Part I instruction ver identification number (EIN). If you do not have a r			-	-		
	n page 3.	er identification framber (EIN). If you do not have a r	idiliber, see now to ge	or				
Note.	If the account is in	more than one name, see the instructions for line 1	and the chart on page	4 for Employer	Identificat	ion number		
guldel	ines on whose nur	nber to enter.					П	7
Pari	Certific	eation						
	penalties of perju							
1. The	e number shown o	n this form is my correct taxpayer identification num	iber (or I am waiting for	a number to be is	sued to m	e); and		
Ser	vice (IRS) that I an	ackup withholding because: (a) I am exempt from ba n subject to backup withholding as a result of a fallu backup withholding; and						
		other U.S. person (defined below); and						
		ntered on this form (if any) indicating that I am exemp	of from EATCA reportin	a is correct				
		ns. You must cross out Item 2 above if you have been		_	tv sublect	to backup	withho	idina
Interes genera Instruc	se you have falled st paid, acquisition	to report all interest and dividends on your tax retur or abandonment of secured property, cancellation or than interest and dividends, you are not required t	<ul> <li>n. For real estate transi of debt, contributions t</li> </ul>	actions, Item 2 do: o an Individual reti	es not app rement an	ily. For mo rangement	rtgage i (IRA), a	and .
Sign Here	Signature of U.S. person >	•	De	ıte ►				
Gen	eral Instruc	tions	• Form 1098 (home mo (tuttion)	rtgage Interest), 1008	8-E (student	t loan Intere	st), 1098	-T
		e Internal Revenue Code unless otherwise noted.	• Form 1099-C (cancel					
as legis	developments. Into slation enacted after t	mation about developments affecting Form W-9 (such we release it) is at www.irs.gov/hv9.	Form 1099-A (acquist					
	ose of Form		Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.					
		W-9 requester) who is required to file an information tain your correct taxpayer identification number (TIN)	If you do not return F to backup withholding.	orm W-9 to the requi	aster with a withholding	TIN, you m ? on page 2	ight be su 2.	ubject
which r	may be your social se	curity number (SSN), individual taxpayer identification	By signing the filled-o		-			
number (ffIN), adoption taxpayer identification number (ATIN), or employer label intermediation number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information			<ol> <li>Cortify that the TIN you are giving is correct (or you are waiting for a number to be issued),</li> </ol>					
returns	include, but are not	limited to, the following:	2. Certify that you are					_
	1000-INT (Interest of		<ol> <li>Claim exemption frapplicable, you are also</li> </ol>					
	-	, including those from stocks or mutual funds)	any partnership income	applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the				
Form 1009-MISC (various types of income, prizes, awards, or gross proceeds)     Withholding tax on toroign partners' share of effectively connected income,     Form 1009-B (stock or mutual fund sales and certain other transactions by     4. Certify that FATCA code(s) entered on this form (if any) indicating that								
brokers) exempt from the FATCA reporting, is correct. See What is FATCA reporting?							7 on	
	1009-S (proceeds fr	om real estate transactions)	hade s to turner intom	maker.				

Form W-9 (Rev. 12-2014)